Serial No.: 10/813,080

In the Claims:

Claim 1 (CURRENTLY AMENDED): A method of diagnosing a probability of pain relief through medical treatment in a patient, the method comprising the following steps:

- (a) administering a perceptual test to the patient, the <u>perceptual perceptional</u> test including a plurality of declarative statements relating to somatization;
- (b) receiving responses from the patient to the plurality of declarative statements, said responses including an affirmative response and a negative response;
- (c) providing at least three scoring templates of pre-selected responses to the plurality of declarative statements, the at least three scoring templates of pre-selected responses being selected from a group of validity factors comprising defensiveness, predictiveness and carelessness;
- (d) providing at least six scoring templates of pre-selected responses to the plurality of declarative statements, the at least six scoring templates of pre-selected responses being selected from a group of clinical factors comprising somatic concern, depressed mode, passive personality, compulsive/obsessive personality, hypomania, and ego integrative defect;
- (e) applying each of said scoring templates from the group of validity factors and the group of clinical factors to the responses to the plurality of declarative statements from the patient, producing a raw score value for each of the validity factors and each of the clinical factors;
- (f) assessing errors in the test utilizing a carelessness factor raw score;
- (g) adjusting each raw score from the group of clinical factors comprising somatic concern, compulsive/obsessive personality, and hypomania, by a percentage of the a defensiveness factor raw score;
- (h) creating a set of final scores relating to the somatic concern clinical factor, the compulsive/obsessive personality clinical factor, and the hypomania clinical factor;
- (i) preserving the <u>a</u> set of raw scores from a group of clinical factors comprising depressed mode, passive personality, and ego integrative defect;

Serial No.: 10/813,080

(j) standardizing the a score for each of the somatic concern clinical factor final score, the depressed mode clinical factor raw score, the passive personality clinical factor raw score, the compulsive/obsessive personality clinical factor final score, and the hypomania clinical factor final score, utilizing a standardizing analysis of a clinically assessed normative group;

- (k) applying a set of scoring rules to a group of clinical factor standardized scores comprising somatic concern, depressed mode, and passive personality, determining a scoring value of standard deviations above the normative group mean for each said standardized score clinical factor;
- (1) <u>determining a scoring value of standard deviations above a normative group mean for</u> each said standardized score clinical factor;
- (1 m) applying the set of scoring rules to the ego integrative defect clinical factor raw score, determining a scoring value of standard deviations above the normative group mean for the ego integrative defect clinical factor;
- (m n) applying the set of scoring rules to a numerical relationship between the scoring value for the somatic concern clinical factor and the scoring value for the compulsive/obsessive personality clinical factor, determining a scoring value of standard deviations above the normative group mean for said numerical relationship;
- (o) determining a scoring value of standard deviations above the normative group mean for said numerical relationship;
- (n p) applying the set of scoring rules to a numerical relationship between the scoring value for the somatic concern clinical factor and the scoring value for the passive personality clinical factor, determining a scoring value of standard deviations above the normative group mean for said numerical relationship;
- (q) <u>determining a scoring value of standard deviations above the normative group mean</u> for said numerical relationship;
- (o r) applying the set of scoring rules to a numerical relationship between the scoring value for the depressed mode clinical factor and the scoring value for the hypomania clinical factor, determining a scoring value of standard deviations above the normative group mean for said numerical relationship;

Serial No.: 10/813,080

(s) determining a scoring value of standard deviations above the normative group mean for said numerical relationship;

- (p t) summing the scoring value for the somatic concern clinical factor, the scoring value for the depressed mode clinical factor, the scoring value for the passive personality clinical factor, the scoring value for the ego integrative defect clinical factor, the scoring value for the numerical relationship between the somatic concern clinical factor and the compulsive/obsessive personality clinical factor, the scoring value for the numerical relationship between the somatic concern clinical factor and the passive personality clinical factor, and the scoring value for the numerical relationship between of the depressed mode clinical factor and the hypomania clinical factor; and
- (q u) thereby producing a single pain index score indicating and measuring the effect of somatization on the patient.

Claim 2 (CURRENTLY AMENDED): A method as in claim 1 and further including the steps of:

- (a) establishing a probability equation score for the probability of pain relief through medical treatment by comparing the predictiveness factor raw score to a regression analysis of predictiveness validity factor raw scores to predicted predict percentages of probability of success to medical treatment;
- (b) plotting the probability equation score and the pain index score to a graph of divergent linear curves of clinically observed percentage probability values and numerical indices scores for multiple patients; and
- (c) thereby comparing a relationship between the probability equation score and the pain index score, confirming accuracy and internal validity of the method diagnosing a probability of pain relief through medical treatment in a patient.